

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 18, 2008 08:00 AM
Secretary of State

DOCUMENT # L03000036265
 1. Entity Name
 BOM JAX LAND HOLDING COMPANY, LLC



Principal Place of Business 1615 NW FEDERAL HIGHWAY STUART, FL 34994	Mailing Address 1615 NW FEDERAL HIGHWAY STUART, FL 34994
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DO NOT WRITE IN THIS SPACE



01222008No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-0245485	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
 WALKER, ANDREW T
 1615 NW FEDERAL HIGHWAY
 STUART, FL 34994

DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) DATE _____


FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WALKER, ANDREW T 1615 NW FEDERAL HIGHWAY STUART, FL 34994
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GALLANT, ANDREWS 1615 NW FEDERAL HIGHWAY STUART, FL 34994
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ZAYAS, HENRY R 1615 NW FEDERAL HWY. STUART, FL 34994
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 02/26/08-80080-021 138.75

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:  **2/14/08** **772-878-5858**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

Andrew S. Gallant